

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

LAKE 52605

4/14/2015

WELL I.D. LABEL# L

START CARD #

ORIGINAL LOG #

114190

1022479

(1) LAND OWNER

Owner Well I.D. _____

First Name _____ Last Name _____

Company J-SPEAR RANCH

Address 39650 CLOVER FLAT ROAD

City PAISLEY State OR Zip 97673

(2) TYPE OF WORK☒ New Well ☐ Deepening ☐ Conversion☐ Alteration (complete 2a & 10) ☐ Abandonment (complete 5a)**(2a) PRE-ALTERATION**

Casing: Dia + From To Gauge Stl Plstc Wld Thrd
Material From To Amt sacks/lbs
Seal: _____

(3) DRILL METHOD
☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud
☐ Reverse Rotary ☐ Other _____
(4) PROPOSED USE
☐ Domestic ☒ Irrigation ☐ Community
☐ Industrial/ Commercial ☐ Livestock ☐ Dewatering
☐ Thermal ☐ Injection ☐ Other _____
(5) BORE HOLE CONSTRUCTIONSpecial Standard ☐ (Attach copy)

Depth of Completed Well 900.00 ft.

BORE HOLE			SEAL			sacks/
Dia	From	To	Material	From	To	lbs
22	0	38	Bentonite Chips	0	38	2850 P
17.25	38	319	Calculated		1832.4	
13.5	319	429				
10	429	545	Calculated			

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E☒ Other POURED DRY

Backfill placed from _____ ft. to _____ ft. Material _____

Filter pack from _____ ft. to _____ ft. Material _____ Size _____

Explosives used: ☐ Yes Type _____ Amount _____**(5a) ABANDONMENT USING UNHYDRATED BENTONITE**

Proposed Amount

Actual Amount

(6) CASING/LINER

Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd
☒ Inside ☐ Outside ☐ Other Location of shoe(s) 429
Temp casing ☐ Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method Holt Downhole

Screens Type		Material					
Perf/	Casing/ Screen	Dia	From	To	Scrn/slot width	Slot length	# of slots
Perf	Liner	12	320	425	.25	1	3150
Perf	Liner	8	428	545	.097	3	1920

(8) WELL TESTS: Minimum testing time is 1 hour☒ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
575	212	260	37

Temperature 62 °F Lab analysis ☐ Yes By _____Water quality concerns? ☐ Yes (describe below) TDS amount

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County LAKE Twp 34.00 S N/S Range 19.00 E E/W WM

Sec 21 NE 1/4 of the NW 1/4 Tax Lot 1900

Tax Map Number _____ Lot _____

Lat _____ " or 42.61163889 DMS or DD

Long _____ " or -120.48902778 DMS or DD

☐ Street address of well ☒ Nearest address

HWY. 31, MP 104, PAISLEY, OR 97636

(10) STATIC WATER LEVEL

	Date	SWL (psi)	+	SWL (ft)
Existing Well / Pre-Alteration				
Completed Well	8/25/2014			40
Flowing Artesian? ☐ Dry Hole? ☐				

WATER BEARING ZONES

Depth water was first found 40.00

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
3/13/2014	40	180	75			40
3/14/2014	240	320	300			40
3/14/2014	420	450	300			40
7/16/2014	530	560	100			40
7/18/2014	805	900	200			40

(11) WELL LOG

Ground Elevation _____

Material	From	To
Sandy Loam & Gravels	0	11
Brown Sandstone some Silt Layers	11	145
Brown Silty Sand	145	168
Slightly cemented gravel	168	204
Some larger gravels with sand layers	204	240
Large water bearing gravels	240	358
Gravels & some silty clay	358	384
Large gravels with sand streaks	384	429
Cemented Gravels & Sand streaks	429	462
Brown Sandstone some Silt Layers	462	585
Brown Claystone	585	705
Brown & Green Claystone	705	806
Brown Conglomerate with gravels and sand	806	900

Date Started 3/12/2014

Completed 8/25/2014

(unbonded) Water Well Constructor Certification

I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.

License Number _____ Date _____

Signed _____

(bonded) Water Well Constructor Certification

I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.

License Number 1385 Date 4/14/2015

Signed ROBERT BUCKNER (E-filed)

Contact Info (optional) _____

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version:

(2a) PRE-ALTERATION

Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd

Material	From	To	Amt	sacks/lbs

(5) BORE HOLE CONSTRUCTION

BORE HOLE			SEAL			sacks/	
Dia	From	To	Material	From	To	Amt	lbs
8	545	900					
			Calculated				
			Calculated				
			Calculated				
			Calculated				

FILTER PACK

From	To	Material	Size

(6) CASING/LINER

Casing Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
									
									
									
									
									
									
									
									
									
									
									
									

(7) PERFORATIONS/SCREENS

[illegible]

(8) WELL TESTS: Minimum testing time is 1 hour

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)

Water Quality Concerns

[illegible]

(10) STATIC WATER LEVEL

[illegible]

(11) WELL LOG

[illegible]

Comments/Remarks

[illegible]

GEOTECHNICAL HOLE REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

LAKE 52605

4/14/2015

Map of Hole

STATE OF OREGON WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

Oregon Water Resources Department

725 Summer St NE, Salem OR 97301
(503)986-0900



LOCATION OF WELL

Latitude: 42.61163889 Datum: WGS84

Longitude: -120.48902778

Township/Range/Section/Quarter-Quarter Section:
WM 34S 19E 21 NENW

Address of Well:

HWY. 31, MP 104, PAISLEY, OR 97636

Well Label: 114190

Printed: April 14, 2015

DISCLAIMER: This map is intended to represent the approximate location the well. It is not intended to be construed as survey accurate in any manner.

Provided by well constructor

